

Whether the disease originates in the synovial membrane, in the crucial ligaments, in the periosteum, or the epiphysis of the joint, the symptoms appertaining to each of them respectively, will be so blended in their advanced course, as to render diagnostic discrimination almost impossible, leaving the previous history as the only guide.

The pathological conditions of joint diseases vary but little, when suppuration, burrowing of pus, has been going on, and the bones have been disintegrated for any length of time; the symptoms attending those conditions are almost uniform in all such cases. The competent and experienced surgeon may yet recognize the patho-genesis of the original disease, but novices rarely realize differences so indistinct and subtle. Thus, in caries of the joint emanating from synovitis, the articular surfaces are more generally denuded of their respective cartilaginous coverings, but the osteo-porosis does not much exceed the surface; the crucial ligaments are but partially destroyed; the semilunar cartilages partly disintegrated, discolored, and mostly detached. On moving the articulation, crepitus is discernible. If, however, the bone has been the starting point of the disease, the caries of the articular surface is generally restricted to the originally affected locality; and the cartilage is there and thereabout disintegrated. The crucial ligaments are mostly destroyed *in toto*, and crepitus is less distinct.

The clinical character of *hip disease* will now demand attention, on account of some peculiarities in its manifestations. *Morbus coxarius* is about as good a term as could be chosen and certainly more appropriate than "*coxalgia*" which applies solely to the pain of the affection.

*The first stage* of this lesion materially conforms with the same stage of the affections of other joints. The only symptom requiring special mention, is limping. It is most noticeable in the morning, less during the day, and least towards evening; most conspicuous after great exertion, and sometimes absent after a day of complete rest. The duration of this period is variable; repeated accidents and the continuous use of the affected extremity may shorten, and constant rest prolong it.

The so characteristic pain at the knee, may already make its appearance at this stage, but if so, there will be likewise indications of retracted muscles, with which this symptom appears conjointly. This pain has often confounded the diagnosis of the less experienced, without any need; for you may press and squeeze the knee joint as you please, without the slightest increase of that pain, whereas the pressure upon, and movement of the hip joint will aggravate it. The progress of the malady may, at this juncture be arrested, and the patient relieved from further trouble.